

SOUTH DAKOTA BOARD OF SOCIAL SERVICES

Meeting Minutes

Tuesday, October 19, 2021

1:30 pm – 4:00 pm CT

Kneip Building, 1st Floor, Conference Room #3

700 Governors Drive, Pierre, SD 57501

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Board Members Present: Hugh Grogan, Holly Bodenstedt, and Cecelia Fire Thunder present via Zoom. Colleen Winter and Sandy Diegel present in person.

Board Members Absent: Linda Wordeman.

Others Present: Laurie Gill, Department of Social Services (DSS) Cabinet Secretary; Brenda Tidball-Zeltinger, Deputy Secretary and Chief of Operations; Tiffany Wolfgang, Director of Behavioral Health; Laura Ringling, Chief of Behavioral Health; Virgena Wieseler, Chief of Children and Family Services; and Marilyn Kinsman, Senior Policy Analyst.

Call to Order and Declaration of Quorum: Hugh Grogan called the meeting to order at 1:34 PM (CT) and determined a quorum. As the newest Board member, Sandy Diegel introduced herself and was welcomed to the Board.

Adoption of Agenda: Motion to approve revised agenda by Colleen Winter, seconded by Holly Bodenstedt. The Board voted by roll call. Grogan, Bodenstedt, Fire Thunder, Winter, and Diegel voted aye. Motion carried.

Approval of Minutes from April 20, 2021 Board Meeting: Motion to approve the April 20, 2021 meeting minutes by Colleen Winter, seconded by Holly Bodenstedt. The Board voted by roll call. Grogan, Bodenstedt, Fire Thunder, Winter, and Diegel voted aye. Motion carried.

Behavioral Health – Tiffany Wolfgang, Director of Behavioral Health, led discussion of the Division of Behavioral Health topics regarding suicide prevention efforts, 988 planning, and the Behavioral Health Voucher Program, and Laura Ringling, Chief of Behavioral Health, presented information about the Human Services Center (HSC) operations and program analysis.

- **Suicide Prevention Efforts:** Tiffany reminded Board members about suicide prevention efforts the Department of Social Services has been involved in. Partners include the Department of Tribal Relations; the Department of Health as the lead for data and report contacts; the Department of Education; and the Department of Social Services as the lead for training, prevention, and intervention. The SDSuicidePrevention.org website was designed as a one stop shop to help lay persons and professionals find meaningful and useful information regarding suicide prevention. Department of Health facts and stats are available on the website. Statistics can be found by county, race, means of suicide, etc. South Dakota had the 8th highest suicide rate in the United States in 2019. In 2020, suicide was the 10th leading cause of death in South Dakota, but was the leading cause among ages 10-19. Efforts must continue to focus around suicide prevention. Four South Dakota counties had the highest percentage of suicides in the nation including Corson, Todd, Oglala

Lakota, and Dewey counties. It is important to promote the suicide prevention website and keep information updated to remain relevant. In August 2021, 1,567 unique individuals visited the website and viewed 4,040 pages. In September 2021, 4,518 individuals had visited the website and viewed over 9,000 pages. There has been a concerted effort to raise awareness about suicide prevention through Cabinet Secretary Gill and media initiatives. Four awareness campaigns have been created to finetune messaging to target populations. The goal of *Bethe1SD* is to spread the word about actions that can be taken to prevent suicide. Promotional press releases were done to provide awareness during September for suicide awareness month. *Reach for Life* was created to promote the crisis line in Indian Country and was created in the colors of the culture. *Safe Space* was created as LGBTQ individuals are generally thought to be at a high risk for suicidal behavior. *Every Member Counts* focuses on the Veteran population as the number of deaths by suicide has continued to rise at an alarming rate. To make individuals aware of campaigns, toolkits have been made available on the suicide prevention website, free of charge. Schools are able to request toolkits that may include bracelets, pens, brochures, back packs, etc. To date, 95 *Bethe1SD* tool kits and 72 *Reach for Life* tool kits have been requested this year. Several Suicide Prevention and Mental Health Promotion Trainings have been held including NAMI Ending the Silence (ETS); Mental Health First Aid (MHFA); Youth Mental Health First Aid (YMHFA); Applied Suicide Intervention Skills Training (ASIST); and Question, Persuade, Refer (QPR). ETS teaches education about the warning signs of mental health conditions and steps to take if someone is showing symptoms of a mental health condition. Tiffany encouraged everyone to take the MHFA and YMHFA trainings, comparing them to the critical need for cardiopulmonary resuscitation (CPR) trainings. MHFA teaches the general public about how to help someone who is developing a mental health problem or experiencing a mental health crisis. YMHFA reviews risk factors and warning signs of mental health problems in adolescents ages 12-18 and how to help an adolescent experiencing a mental health challenge. ASIST is for individuals who want to feel more comfortable, confident, and competent in helping to prevent the immediate risk of suicide. Professionals often receive the ASIST training. QPR teaches three steps to help save a life from suicide. All trainings are available free of charge. In FY 2021, the Division of Behavioral Health supported 29 trainings and 600 participants. The goal is to increase trainings in FY 2022, and to date, 17 trainings have already occurred and 200 individuals have been trained. Members are encouraged to log on to sdsuicideprevention.org and sign up for the quarterly newsletters and view the resources and campaigns that are available on the website. The Department of Tribal Relations and Great Plains Tribal Leaders Health Board are partners. Campaign responses have been very positive. The Division of Behavioral Health has requested a booth at the upcoming Lakota Nation event in Rapid City. The Departments of Social Services; Health; and Tribal Relations formed an interagency workgroup and conducts monthly data reviews, using the data now, to take action. A pilot program includes six counties. Outreach is to evaluate data, trends and themes; provide technical assistance and resources; and identify intermediate and long-term supports. Cecelia Fire Thunder suggested to make it easier to recognize when people need help by reframing how we say it (suicide, mental health), to make it meaningful. Tiffany stated the Department relies on our Tribal partners to ensure messaging is appropriate.

- **988 Planning Grant:** In July 2022, through Congressional action, 988 will replace the current Suicide Prevention Crisis Hotline, 1.800.273.TALK(8255) number. A grant was awarded in the amount of \$130,000.00 and granted for the period of February 1, 2021 through January 31, 2022. Partners in the 988 State Planning Grant efforts include members of the Behavioral Health Crisis Stakeholder Coalition. The Coalition is comprised of representation from the state's only Lifeline member (Helpline Center); state suicide prevention coordinators from the Department of Health and Department of Social Services; representatives from mobile crisis providers from the largest community in South Dakota as well as from a midsized, rural community; representation from crisis systems serving individuals in a behavioral health crisis; representatives from law enforcement; statewide 911 representative; representation from the publicly funded community mental health and substance use provider system; representatives from psychiatric inpatient providers; tribal representatives; peer based organization, and individuals with lived experience of suicide loss and attempt. The Department wants 988 to be recognized like 911. Trained counselors are available to

assist callers 24/7, 365 days a year. A question was asked how many people call the hotline. In CY 2020, 3,811 calls were answered to the national suicide prevention number. 80% were supported with a safety plan put in place without additional intervention. The hotline is supported by crisis counselors and answered by LineLine.

- **Behavioral Health Voucher Program:** Through crisis counseling grants awarded prior to the pandemic due to tornadoes, flooding, etc., the Division of Behavioral Health created 605 Strong. Individuals can call 211 to visit with a counselor about necessities. Data in the 211 resource database revealed that some people needed more than just referral information; they needed therapeutic supports. As a result, the Behavioral Health Voucher Program has been created, offering vouchers to work with therapists. This program provides access to mental health and substance use treatment to individuals in need, at a provider of their choosing, at no cost if deemed eligible. This program targets adults and youth who have been impacted by floods, severe weather, and tornadoes in 2019 and/or the ongoing COVID-19 pandemic. Individuals may be referred by their provider, through the crisis counseling outreach, or by calling 211. There are 52 enrolled providers across the state that offer services within 10 days of referral. Most of the providers are private independent practitioners. To date, more than 250 individuals have been issued a voucher. Services include individual mental health and substance use disorder services, and transportation cost assistance for appointment access. Telehealth-based services are also available. A question was asked if telehealth services will be available ongoing. Telehealth-based services will continue ongoing, beyond the pandemic. A question was asked about HRSA. The majority are enrolled already so they are already accessing loans. A question was asked if people are being seen by a provider. Laurie Gill shared that the Department is looking at opportunities to address workforce shortages using publicly funded dollars. The challenge is the use of one-time funding vs ongoing funding and competing at the local level.
- **Human Services Center Operations & Program Analysis:** Laura Ringling reminded members that the Human Services Center (HSC), is South Dakota's only state-run psychiatric hospital, located just north of Yankton. HSC provides acute and longer-term inpatient behavioral health treatment to adults and adolescents. The behavioral health service delivery is undergoing a transformation nationwide with increased focus on mental health crisis response and regionalization of services so that individuals can be served in the right level of care (which is not necessarily that highest level of care) and where they are at in their communities. Our current system has been heavily reliant on inpatient psychiatric hospitals, but the Department wants that to evolve as the system evolves, so we've engaged with a consultant to help us plan for the future of HSC. HSC is engaged with the Western Interstate Commission for Higher Education (WICHE) which is an interstate compact that partners with states to provide technical assistance and consulting to assist with generally improving the public mental health system. WICHE is helping HSC establish optimal capacity and patient programming to meet the needs of South Dakota. The primary goal is to align HSC's campus mission with the community needs while being realistic about available resources. Staffing at HSC has been challenging due to the statewide and nationwide shortage of nurses and healthcare workers. HSC is also looking for recommendations related to staffing models and staffing levels to ensure units are staffed appropriately and in compliance with best practice recommendations and regulatory requirements. Staffing in a psychiatric hospital presents unique challenges due to regular fluctuations in patient acuity and census. HSC recognizes the future available workforce in the region may not support reopening all units in the same capacity that they have been historically. HSC is focused on creating the right mix of specialized units to serve the populations needing access to inpatient care as well as determining optimal capacity is moving forward. The Department is currently reviewing recommendations and in process of putting together a plan for implementation.

Children and Family Services: Virgena Wieseler introduced herself and provided information about the following:

- **Commission on Child Support 2021:** The Child Support Commission meets every four years to review child support guidelines as per federal requirements. The Commission may recommend changes reflecting adjustments in the costs of raising children and other child support issues. The Commission was scheduled to meet in 2020, but due to the pandemic, states were given an extra

year. The Commission members were appointed by Governor Noem and include Justice Scott Myren, Chairman; Senator Arthur Rusch; Representative Mike Stevens; Lindsey Riter-Rapp, Attorney; Terri Williams, Child Support Referee; Amber Kinney, Custodial Parent; Rob Simmermon, Non-Custodial Parent; and Virgena Wieseler, Chief of Family and Children Services. Department of Social Services staff from the Division of Child Support, Legal Services, and the Secretariat, as well as an attorney from the Unified Judicial System assist the Commission with its work. Senator Rusch and Representative Stevens will do a 101 presentation on child support during the upcoming session. Dr. Jane Venohr, Center for Policy Research, is the economist that provides information about the cost of raising children, economic guidelines, and the new federal guidelines that need to be implemented in order to be in compliance. Alex Mayer has been hired as the new Division of Child Support Director and will begin employment on Monday, October 25, 2021. Three meetings have been held to date, one in July, August, and September. Public hearings followed the meetings in August and September allowing the public impacted by child support to provide input. The next meeting is on October 27, 2021 in Rapid City with another public hearing following. The last meeting of the Commission will be held on November 18, 2021 in Pierre. The Commission will submit its report and recommendations to Governor Noem and the Legislature by December 31, 2021, so any statute changes can be considered during the 2022 legislative session.

- **Independent Living and Educational Training Voucher Program:** The Chafee Program provides flexible funding to support youth who have experienced foster care at age 14 or older in their transition to adulthood through transitional services. These youth need the same kind of supports and assistance our own children needed when they were preparing for adulthood. Services may include assistance in obtaining a high school diploma and post-secondary education, career exploration, vocational training, job placement and retention, training and opportunities to practice daily living skills, substance abuse prevention, and preventive health activities. Multiple services are provided to youth in the custody of Child Protection Services and tribal youth ages 14-21, e.g., independent living services workshops to prepare the individual with job skills, how to create a resume, find an apartment, or provide financial assistance; teen conferences on a college campus, independent living assessments and case planning; driver education; housing support; and starter kit funds which allow the individual to earn money for participating, up to \$1,200 or educational vouchers funding for scholarships for \$5,000 and with pandemic funding up to \$12,000 through September 2022. South Dakota received an additional \$1.3 million in Chafee dollars and \$200,000 in Educational Training Voucher (ETV) dollars. Hugh Grogan asked how many kids are back due to COVID-19. Less than 20. Virgena stated the Department does not want kids to transition without connections. The Department works hard so young people have connections. Medicaid is provided up to the age of 26. During the pandemic, kids who had already transitioned out were allowed to return without penalty.
- **FTE for Adoption Added During Last Legislation Session:** The number of adoptions continue to grow in South Dakota. There has been an increase in the number of children placed over the past 11 years from 147 in 2010 to 262 in 2021. Even though the number of children placed for adoption continues to increase, there are approximately 104 children free for adoption without an identified resource. These children are older youth with more complex needs, e.g., tough backgrounds, abused and/or neglected, traumatized, or large sibling groups. The adoption program specialist is responsible for monitoring these children and ensuring diligent recruitment efforts are ongoing. There has been increase in the number of Adoption Assistance cases over the past 11 years from 1,452 in 2010 to 2,081 in 2021. The increase in the number of adoptions has impacted the Adoption Assistance caseload. The adoption program specialist is responsible for assisting these children and their families with post adoption services, which includes monthly subsidy payments, Medicaid coverage, assistance in locating appropriate services, assisting adult adoptees with birth family searches, and crisis stabilization. Another factor increasing the workload is the significant increase of adoptive families in crisis. A second adoption program specialist has been hired.
- **More Children Placed for Adoption Last Fiscal Year than Ever Before:** In FY 2021, more children in South Dakota than ever before (262) have been placed with adoptive families, and 227 adoptions were finalized. Foster parent adoption is the largest group (58%), followed by relative adoption

(38%), and very few nonrelative adoptions (4%). Cecelia Fire Thunder asked if there is a county by county map showing where children are placed. Data is done by CPS offices, not by county. Information is available per CPS office. While children are in DSS care, are there therapeutic services prior to being adopted out? ACE scores, history, parents, triggers, etc. are looked at to align children with professionals to address issues.

- **Child Care Federal Funding:** There was a child care crisis that became evident during COVID-19. Kids were home, staff were home, and daycares were closing. Nine million dollars in Coronavirus Aid, Relief, and Economic Security Act (CARES) funding was awarded to the Department and 8.4 million was awarded to registered and licensed providers. The remaining \$577,000 will be used to update technology, which is beneficial for providers, families, and the Department. Additionally, \$25.8 million in Coronavirus Response and Relief Supplemental Appropriations Act (CRRSA) was awarded to the Department. Round one stabilization/tuition relief grants totaling approximately \$10 million to licensed and registered providers, as well as in-home, informal and relative providers and round two stabilization grants provided another \$4 million. Some ways the Department is helping providers is by paying for CPR costs for providers and training for providers to help with businesses, and child care development for providers. The Department also received two types of funds through the American Rescue Plan Act (ARPA). The ARPA stabilization funds (\$61.8 million) must be related to COVID and will provide grants to Child Care and Development Fund (CCDF) eligible providers (registered, licensed, informal, or in-home providers receiving subsidy), and ARPA (\$38.6 million) discretionary funds will be used to expand access to high-quality child care, expand access to child care assistance, mental health supports, and outreach on the availability of child care assistance. The Department will be working with a vendor on a plan for spending to keep daycares open and available for families. The focus on startup grants for the pilot area is workforce and how to help with workforce issues and challenges in healthcare. Sandy Diegel asked about daycares that went out of business. The Office of Licensure and Accreditation knows which daycares closed and there is an opportunity to reach them. Colleen Winter stated the process for funding to communities can be a daunting task. Hugh Grogan asked about press releases, some people are not aware of what happened with the funding. The Department publishes press releases, staff send emails to providers, and staff will call providers who do not respond. There is lots of follow up. Laurie Gill, Cabinet Secretary, stated the funds are for licensed and registered daycares within the Department of Social Services. She asked members to think about people interested that need help, and to let the Department know so technical assistance, resources, or other help can be provided. Brenda Tidball-Zeltinger, Deputy Secretary, stated the Board will be informed to help spread the word. As part of the federal government's priority of the stabilization group, there is dedicated work going on to in South Dakota to provide resources to help daycares and to bring back daycares that left during COVID. Members were asked to let the Department know if they know of someone who doesn't know about the opportunity so staff can reach out to them.

Board Membership: Cabinet Secretary Gill thanked Hugh Grogan and Linda Wordeman for their many years of service on the Board of Social Services. The meeting held today was the last meeting for both Hugh and Linda. The Department has been reviewing all boards under the purview of the Department of Social Services and effective October 31, 2021, is implementing two three-year term limits for members of the Board of Social Services, similar to other DSS boards. With the resignation of Hugh Grogan, a new chairman will be appointed at the next meeting. The Department also intends to gather feedback from board members to find innovative ways to use the Board for public focus groups and public hearings. DSS staff are also identifying processes to use the Board of Social Services to get valuable input and public feedback. Members were asked to let Cabinet Secretary Gill know if they are interested in serving as Chair of the Board, or if they have recommendations for good, qualified people who may be interested in serving on the Board. Members will be notified where they are at with their respective term limits.

Future Agenda Items: There were no suggestions for future agenda items by members.

Public Comment: At 3:25 PM CT, Chairman Grogan asked if anyone wished to provide public

comments. No one appeared for public comment.

Establish Next Meeting Date: The next meeting date is set for April 19, 2022. The meeting may be held in-person with an opportunity to join the meeting via telephone.

Adjourn: Cecelia Fire Thunder made a motion to adjourn. Seconded by Coleen Winter. The Board voted by roll call. Grogan, Bodenstedt, Fire Thunder, Winter, and Diegel voted aye. Motion carried and the meeting was adjourned at 3:28 PM (CT).

DRAFT